



# Host Family Application

## Applicant information

Prospective host father full name: first/middle/last	Other name(s)	Soc. Sec. Number	Date of birth	NSOPW Check
Prospective host mother full name: first/middle/last	Maiden/other name(s)	Soc. Sec. Number	Date of birth	NSOPW Check

## Contact information

Home address	Home telephone
	Host father's cell phone (if any)
	Host mother's cell phone (if any)
School district	Email address for agency information
Were you referred to USAX? By who?	Other contact information (if any)

## Auto insurance information

USAX requires annual verification of auto insurance coverage for hosts and other household members likely to be transporting the student. Please attach a copy of your insurance coverage to this application showing that your insurance meets or exceeds the minimum acceptable coverage:

**\$100,000.00 bodily injury**

**\$300,000.00 per accident**

**\$50,000.00 property damage**

## Education & employment information

Host father's level of education	Host mother's level of education
Host father's occupation	Host mother's occupation
Host father's employer and address	Host mother's employer and address
May we contact you at work? <input type="checkbox"/> No <input type="checkbox"/> Yes at this number:	May we contact you at work? <input type="checkbox"/> No <input type="checkbox"/> Yes at this number:

## Other adult household members

Directions: Other than the applicants listed above, for each member of your household 18 years old or older, or for frequent adult visitors who might spend the night with the family, please provide the following information:

Other adult's full name: first/middle/last	Maiden/other name(s)	Soc. Sec. Number	Date of birth	NSOPW Check
Other adult's full name: first/middle/last	Maiden/other name(s)	Soc. Sec. Number	Date of birth	NSOPW Check
Other adult's full name: first/middle/last	Maiden/other name(s)	Soc. Sec. Number	Date of birth	NSOPW Check

## Minor children at home

Name: first/last	Date of birth	Name: first/last	Date of birth
Name: first/last	Date of birth	Name: first/last	Date of birth
Name: first/last	Date of birth	Name: first/last	Date of birth

## Indoor Pets

Name	Type/breed	Name	Type/breed
Name	Type/breed	Name	Type/breed

## General Questions

Describe your home and location:
Describe the student's room – will the student share a room? If yes, with whom?
Who will student spend time with? Will student have opportunity to meet other teenagers/students?
Describe your family's daily routine/activities – list the activities/hobbies of the family:
Describe your religious affiliation/church – will the student be expected to attend?
Please indicate any social customs or holidays in which your family does not participate due to moral beliefs: <input type="checkbox"/> Alcohol <input type="checkbox"/> Birthdays <input type="checkbox"/> Card Games <input type="checkbox"/> Dancing <input type="checkbox"/> Halloween <input type="checkbox"/> Costume Parties <input type="checkbox"/> Gift Giving <input type="checkbox"/> Christmas <input type="checkbox"/> Other:
Please describe your family's meal and eating habits. In an ordinary week, how often does your family: Eat a meal together? <input type="checkbox"/> Every Day <input type="checkbox"/> Most Days <input type="checkbox"/> Some Days <input type="checkbox"/> Seldom Eat a home-cooked meal? <input type="checkbox"/> Every Day <input type="checkbox"/> Most Days <input type="checkbox"/> Some Days <input type="checkbox"/> Seldom Eat take-out or fast food? <input type="checkbox"/> Every Day <input type="checkbox"/> Most Days <input type="checkbox"/> Some Days <input type="checkbox"/> Seldom Eat out at restaurants? <input type="checkbox"/> Every Day <input type="checkbox"/> Most Days <input type="checkbox"/> Some Days <input type="checkbox"/> Seldom Expect students to prepare own food? <input type="checkbox"/> Every Day <input type="checkbox"/> Most Days <input type="checkbox"/> Some Days <input type="checkbox"/> Seldom Are you open to allowing a student to use your kitchen? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you willing to try new foods your student prepares? <input type="checkbox"/> Yes <input type="checkbox"/> No
Does your family observe any special dietary restrictions?
What household duties would you expect of a student?
Do/have you hosted with any other organizations? If yes, which? Are you now hosting or able to host with us simultaneously – any restrictions?
Does anyone smoke? If yes, who/where (inside/outside)?
Has anyone in your household struggled with anger, emotional self-control, behavioral stability, etc.? <input type="checkbox"/> No <input type="checkbox"/> Yes – please explain:
Has anyone in your household struggled with alcoholism? <input type="checkbox"/> No <input type="checkbox"/> Yes – please explain:
Has anyone in your household been involved with drugs? <input type="checkbox"/> No <input type="checkbox"/> Yes – please explain:
Has anyone in your household been involved in criminal activity? <input type="checkbox"/> No <input type="checkbox"/> Yes – please explain:

## About Acceptable Students

Sex:	<input type="checkbox"/> Male Students – how many? _____	<input type="checkbox"/> Female Students – how many? _____	<input type="checkbox"/> Sibling Groups
Age:	<input type="checkbox"/> Elem/Middle School Age	<input type="checkbox"/> High School Age	<input type="checkbox"/> College Age/Adult
Duration:	<input type="checkbox"/> Short-Term (Less Than 30 Days)	<input type="checkbox"/> Long-Term (1 Semester Or Longer)	

Student characteristics you can handle: \_\_\_\_\_ Comments: \_\_\_\_\_

Non-Christian students	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Younger students/students needing care	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who get homesick	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students whose English is very limited	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who need help with homework	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students requiring more supervision	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students requiring computer supervision	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who are not motivated	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who stay up late at night	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students involved in extra-curricular activities	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students requiring more transportation	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who want to invite friends	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who do not participate in family	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who have been in trouble	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who wish to learn to drive	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who smoke (18 and older)	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who drink (21 and older)	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Students who are sexually active	<input type="checkbox"/>	<input type="checkbox"/>
	yes	no

Do you have any other student qualifications?		

At what airport(s) are you able to pick up students?			
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>

## **Qualification statement**

Hosts must continuously meet the criteria for participation in the program.

Hosts shall submit a complete application which shall truly, accurately and completely describe the hosts and their personality, family lifestyle and expectations.

The hosts, and any other adult household members, give consent to the agency to perform criminal background checks and child abuse clearance checks on all household members over 18 years of age on an ongoing basis. The hosts shall be responsible to notify the agency whenever new people move into the home. The hosts understand that hosting requires all household members to have a satisfactory background.

The hosts shall maintain the appropriate auto insurance as required by the agency and its insurer. The minimum acceptable coverage is: \$100,000.00 per person – \$300,000.00 per accident and \$50,000.00 property damage

The hosts understand that hosting for USAX requires a commitment to the agency which gives the agency certain authority regarding the student in their care, such as the authority to limit the simultaneous placement of other international students from other agencies.

The hosts attest that they and their household meet the criteria necessary for participation in the USAX program as follows:

- The family as a whole, and all anticipated household members residing with the student, has the appropriate stability, character and temperament for hosting a student in the home. Each household member is capable of maintaining control of his/her emotions and behavior. No household member has undisclosed mental or psychiatric conditions, any criminal history, history of drug or alcohol abuse or any history of child or spousal abuse.
- The hosts have the financial wherewithal required to host international students and shall not be dependent upon any reimbursement for hosting as an additional income source. The hosts understand that they shall be responsible for any tax consequences due to the receipt of the reimbursement for hosting expenses.
- The hosts understand that their home and the student's bedroom must continuously meet the agency's housing criteria:
  - The home shall appear clean and structurally safe.
  - Internet access shall be available for the student in the home.
  - The student's bedroom shall be appropriate and safe – it shall have adequate heating and ventilation, adequate electricity service and lighting, a smoke detector and the bedroom shall have two means of egress, usually a door and a window.
  - The student's bedroom shall include, at minimum, a private bed and dresser or closet for the student to store his/her clothing and belongings.
  - The student's bedroom and the bathroom that the student will use shall have doors that can be closed tightly to ensure privacy.
  - Somewhere in the home, either in the prospective bedroom or elsewhere, there shall be a desk or table for the student's use in completing homework assignments.
  - The home shall have enough space so that the student will not need to share a bedroom with an adult, individual of the opposite sex, or individual older or younger than the student by 4 or more years.
  - The home shall be along the public school bus route providing transportation to the school the prospective student will attend.
- The hosts have read, understand and intend to enforce the Student Behavioral Agreement when hosting school-age students.
- The hosts have read, understand and intend to abide by the College Student Agreement when hosting college-age students.
- The hosts have read, understand and intend to abide by the terms of this Host Family Agreement.

The hosts understand that the agency shall perform an in-home inspection of the hosts' home ensuring that it meets the agency's housing criteria and conduct an in-home interview and orientation of for the hosts.

### **Additional application statements**

I/we understand and agree that, while a USAX student is living with us, we shall notify USAX and provide the personal information (name, birth date, Social Security Number) of any adult wishing to move into our home. USAX must conduct necessary background checks and give approval prior to allowing any other adult to move into our home.

I/we understand and agree that, while a USAX student is living with us, we shall not accept students placed through any other agency without first obtaining the consent of USAX.

I/we understand and agree that application to host with USAX and that acceptance by USAX as a host family does not guarantee that USAX will be able to locate or place a student in our home.

## Confirmation of information and agreement

We, the hosts, and any anticipated adult members of our household during the time that the student shall reside with the hosts, certify that the information contained herein is accurate, true and complete to the best of our knowledge. We certify that we have read and agree with the foregoing qualification statement as well as the additional application statements and have also received, read, fully understood and intend to comply with the agency's Host Family Agreement.

---

Signature of prospective host father

Date

---

Signature of prospective host mother

Date



717-431-8181



717-431-8879



info@usax.us



www.usax.us



usaxperience



usaxperience



usaxperience



usaxperience



1745 Furnace Hill Road

Denver, PA 17517 USA

Reference for (name of prospective host family):

Name of Reference	Relation to prospective host family
Address of Reference	Telephone number of Reference
	Best time(s) to call?
	Email Address of Reference

Do you know prospective host father – how long – describe relation?

Do you know prospective host mother – how long – describe relation?

Do you know prospective family's children– how long – describe relation?

Do you visit the prospective host home – how often – describe?

Do the parents seem happy and stable?

Do the children seem happy and stable?

Are you aware of any family problems?

Any alcoholism, drug or sexual abuse?

Do you have any reservations about recommending this family?

Would you like to speak with an agency representative about this reference?  Yes  No  
 Would you like to learn more about hosting students or guests through USAXperience?  Yes  No

Signature of Reference

Date



717-431-8181  
 FAX 717-431-8879

info@usax.us  
 www.usax.us

usaxperience  
 usaxperience

usaxperience  
 usaxperience

1745 Furnace Hill Road  
 Denver, PA 17517 USA

Reference for (name of prospective host family):

Name of Reference	Relation to prospective host family
Address of Reference	Telephone number of Reference
	Best time(s) to call?
	Email Address of Reference

Do you know prospective host father – how long – describe relation?

Do you know prospective host mother – how long – describe relation?

Do you know prospective family's children– how long – describe relation?

Do you visit the prospective host home – how often – describe?

Do the parents seem happy and stable?

Do the children seem happy and stable?

Are you aware of any family problems?

Any alcoholism, drug or sexual abuse?

Do you have any reservations about recommending this family?

Would you like to speak with an agency representative about this reference?  Yes  No  
 Would you like to learn more about hosting students or guests through USAXperience?  Yes  No

Signature of Reference

Date



717-431-8181  
717-431-8879



info@usax.us  
www.usax.us



usaxperience  
usaxperience



usaxperience  
usaxperience



1745 Furnace Hill Road  
Denver, PA 17517 USA

Reference for (name of prospective host family):

Name of Reference	Relation to prospective host family
Address of Reference	Telephone number of Reference
	Best time(s) to call?
	Email Address of Reference

Do you know prospective host father – how long – describe relation?

Do you know prospective host mother – how long – describe relation?

Do you know prospective family's children– how long – describe relation?

Do you visit the prospective host home – how often – describe?

Do the parents seem happy and stable?

Do the children seem happy and stable?

Are you aware of any family problems?

Any alcoholism, drug or sexual abuse?

Do you have any reservations about recommending this family?

Would you like to speak with an agency representative about this reference?  Yes  No  
 Would you like to learn more about hosting students or guests through USAXperience?  Yes  No

Signature of Reference

Date



717-431-8181



717-431-8879



info@usax.us



www.usax.us



usaxperience



usaxperience



usaxperience



usaxperience



1745 Furnace Hill Road

Denver, PA 17517 USA